



- MUST USE MOST **CURRENT** FORM
- **PRINT** CLEARLY IN BLACK INK
- MAKE SURE ENTIRE CIRCLE IS **FILLED**

EXAMPLE:

Yes ☒ No ☐

PRIVATE SECURITY INFORMATION CHANGE FORM

GENERAL INFORMATION

I understand that this form is ONLY to be used to change address, phone numbers Yes ☐
or e-mail addresses. This does NOT include company or individual name change. No ☐

Type of Change: ☐ Company ☐ Branch ☐ Individual

↑ THE ABOVE SPACE IS RESERVED FOR OFFICE USE ONLY ↓

ONLY FILL OUT THE APPROPRIATE SECTION

PART I. COMPANY ONLY

Company Name		Company License No.
NEW Mailing Address		
City	State (2-Digit Code)	ZIP
NEW Physical Address		
City	State (2-Digit Code)	ZIP
NEW Business Phone ()	NEW Business Fax ()	
NEW Business Email		
Last Name Of Contact Person (IF DIFFERENT THAN SIGNER)	First Name	Contact Person's Phone ()
Manager Printed Last Name	Printed First Name	

PART II. BRANCH ONLY

Company Name		Branch License No.
NEW Physical Address		
City	State (2-Digit Code)	ZIP
NEW Branch Phone ()	NEW Business Fax ()	
Last Name Of Contact Person (IF DIFFERENT THAN SIGNER)	First Name	Contact Person's Phone ()
Manager Printed Last Name	Printed First Name	

PART III. INDIVIDUAL ONLY (This form can *not* be used for Driver License Changes)

Applicant Last Name	First Name	M.I.	Suffix (If Any)
Applicant Social Security No. - -	NEW Phone ()	NEW Email	
NEW Residential Address			
City	State (2-Digit Code)	ZIP	

SIGNER INFORMATION (DOES NOT APPLY TO INDIVIDUALS)

Printed Last Name Of Person Signing (IF DIFFERENT FROM MANAGER LISTED ABOVE)	Printed First Name
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I verify the information provided is true and correct, and I understand this is an official government record and any false statement made on this document or any other supplement provided to DPS may result in criminal prosecution.

Individual Signature (FOR INDIVIDUAL ONLY) _____ Date ____ / ____ / ____

Manager, Manager's Designee or Owner Signature (FOR COMPANY OR BRANCH ONLY) _____ Date ____ / ____ / ____

This form and attachments can be faxed to (512) 424-7726 or forwarded by mail to:

**Texas Department of Public Safety
Private Security MSC 0242
P.O. Box 4087
Austin, Texas 78773-0001**